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STATE OF ARIZONA
APPLICATION FOR CERTIFICATION
AS A PARTICIPATING CANDIDATE

Pursuant to Arizona Revised Statutes §§16-947 and 948 and AAC R2-20-104 (D)
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OFFICE USE ONLY

☒ Initial Application ☐ Amended Application

FILED ID
 800493210

NAME OF CANDIDATE TRISH GROE		OFFICE SOUGHT (Include Legislative District, if applicable) STATE REP. DISTRICT 3	
ADDRESS (NUMBER & STREET) 1980 Deer Run Dr		CITY LAKE HAVASU	STATE AZ
MAILING ADDRESS (if different from above) same as above		CITY same as above	STATE AZ
CANDIDATE'S TELEPHONE # (928) 855-5413	CANDIDATE'S FAX # 928-855-5413	CANDIDATE'S E-MAIL ADDRESS trishgroe@citlink.net	
CANDIDATE'S PARTY AFFILIATION (if any) Republican			
NAME OF CANDIDATE'S COMMITTEE Committee To Elect TRISH GROE			
COMMITTEE'S ADDRESS 1980 Deer Run Dr		CITY LAKE HAVASU	STATE AZ
COMMITTEE'S PHONE # (928) 855-5413		COMMITTEE'S E-MAIL ADDRESS trishgroe@citlink.net	
NAME OF DESIGNATED INDIVIDUAL WITH AUTHORITY TO WITHDRAW FUNDS (IF APPLICABLE) (A.R.S. §16-948)			
DESIGNATED INDIVIDUAL'S ADDRESS		CITY	STATE
DESIGNATED INDIVIDUAL'S TELEPHONE #		DESIGNATED INDIVIDUAL'S FAX #	
		DESIGNATED INDIVIDUAL'S E-MAIL ADDRESS	
LIST THE NAME OF THE FINANCIAL INSTITUTION FROM WHICH THE CANDIDATE AND THE DESIGNATED INDIVIDUAL WILL CONDUCT ALL FINANCIAL ACTIVITY FOR THE CANDIDATE'S CAMPAIGN COMMITTEE (do not list account number). (A.R.S. §16-948(A)). Mohave State Bank			

DESIGNATED CANDIDATE'S STATEMENT (If applicable) (A.R.S. §16-948(B)): I hereby designate _____ as my duly authorized Designated Individual, with the authority to withdraw funds and make expenditures from my campaign account on my behalf.

Date: **June 9, 2004**

Candidate's signature: **Trish Groe**

CCEC-003-APP/CERT-08/28/01

Application for Certification - Part II

CANDIDATE AND DESIGNATED INDIVIDUAL'S STATEMENT (A.R.S. §16-947): I, the undersigned, upon my oath and under penalty of perjury, certify that the following statements are true and accurate to the best of my knowledge and belief: